

**COUNTY OF WEAKLEY  
DEPARTMENT OF FINANCE  
AUTHORIZATION FOR AUTOMATIC PAYROLL DEPOSIT**

Are you currently drawing a Tennessee Consolidated Retirement check? Yes or No

NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

BANK NAME: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_

CHECKING ACCOUNT #: \_\_\_\_\_

AND/OR

SAVINGS ACCOUNT #: \_\_\_\_\_

ROUTING/TRANSIT/ABA NUMBER: \_\_\_\_\_

PLEASE ATTACH A VOIDED CHECK.

I hereby authorize the Weakley County Department of Finance to automatically deposit my payroll check into the above account(s).

PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**\*\* IF YOU SHOULD HAVE ANY CHANGES, BE SURE TO SEND THE DEPARTMENT OF FINANCE WRITTEN NOTIFICATION IN A TIMELY MANNER.**